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Bib Data Sheet

CONFIRMATION NO. 9353

<b>SERIAL NUMBER</b> 10/521,358	<b>FILING OR 371(c) DATE</b> 07/26/2005 <b>RULE</b>	<b>CLASS</b> 366	<b>GROUP ART UNIT</b> 1797	<b>ATTORNEY DOCKET NO.</b> 87333.5203
<b>APPLICANTS</b> Helmut Herz, Oberschleibheim, GERMANY; Klaus Kaufmann, Oberschleibheim, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/07653 07/15/2003				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 102 32 202.3 07/16/2002				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 19
Verified and Acknowledged Examiner's Signature _____ Initials _____			<b>INDEPENDENT CLAIMS</b> 1	
<b>ADDRESS</b> Baker & Hostetler Washington Square Suite 1100 1050 Connecticut Avenue N W Washington, DC20036				
<b>TITLE</b> SAMPLE TREATMENT STATION INCLUDING PLATES				
<b>FILING FEE RECEIVED</b> 1740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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 2-12-08